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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/659,466	09/10/2003	Eugene L. Shaw	7248.3001.001	4965
7590 01/27/2005		EXAMINER		
William J. Schramm			STAFIRA, MICHAEL PATRICK	
Reising, Ethington, Barnes, Kisselle, P.C. P.O. Box 4390			ART UNIT	PAPER NUMBER

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Please find below and/or attached an Office communication concerning this application or proceeding.

(CW)

Application No. Applicant(s) 10/659,466 SHAW ET AL. Interview Summary Art Unit Examiner Michael P. Stafira 2877 All participants (applicant, applicant's representative, PTO personnel): (3) Gene Shaw. (1) Michael P. Stafira. (2) Bill Schramm. (4)Dave Malkan (5) Erie Hayes. Date of Interview: 1/21/05. Type: a) ☐ Telephonic b) ☐ Video Conference 2) applicant's representative c) Personal [copy given to: 1) applicant Exhibit shown or demonstration conducted: d) ✓ Yes e) No. If Yes, brief description: Applicant provided demonstration of a tire inspection apparatus. Claim(s) discussed: 1-24. Identification of prior art discussed: Lindsay et al. (6,791,695). Agreement with respect to the claims f) was reached. g) was not reached. h) \times N/A. Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: Examiner and applicant discussed clarification of independent claims over the prior art_. (A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.) THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, if required

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